 **File Registration for Coach Candidates**

**Date:**

**Name:**

**Age: Birthdate:**

**Address:**

**City: Postal Code: Phone:**

**Email address:**

**HCBC # EC Sport License # NCCP #**

**EC Registered Coach Status: yes/no Registered for access to CHAR yes no**

**Please Indicate which Equestrian Canada Certification you are training for:**

|  |  |
| --- | --- |
|  | **Western Instructor** |
|  | **Western Competition Coach** |
|  | **Western Competition Coach Specialist** |
|  | **English Instructor** |
|  | **English Competition Coach (jump and flat)** |
|  | **English Competition Coach (flat only)** |
|  | **English Competition Coach Specialist** |
|  | **Drive Instructor** |

**Mentor Name:**

**Supervising Coach Name:**

Return this registration form to [coaching@hcbc.ca](mailto:coaching@hcbc.ca). Please enter all of the information you can however you do not need to have any pre-requisites completed to have a coaching file opened for you.

By filling out and returning this application you give HCBC permission to send emails containing information that is relevant to the Equine Canada Coaching and Instructor programs. Examples would be notifications of NCCP Course dates, Evaluation dates and important changes in the coaching programs. If at any time you would like to stop receiving Coaching Program emails you may unsubscribe by emailing [coaching@hcbc.ca](mailto:coaching@hcbc.ca) and asking to be taken off this email list.

**Return this form to:**

**Horse Council BC 27336 Fraser Hwy, Aldergrove, BC V4W 3N5 or email to coaching@hcbc.ca**

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